

# Chesterfield Fire and EMS

## Fire and Life Safety Division - Fire Marshal's Office

P.O. Box 40 Chesterfield, VA 23832 Phone (804) 748-1426 Fax (804) 768-8766



### APPLICATION FOR OPEN BURNING PERMIT

New Application Renewal (include current Permit # \_\_\_\_\_)

**Application must be printed or typed - Incomplete forms will NOT be processed**

Applicant / Contractor Name \_\_\_\_\_ Date \_\_\_\_\_

**Complete** - Mailing address \_\_\_\_\_

Email Address \_\_\_\_\_

Phone: Home \_\_\_\_\_ Work \_\_\_\_\_ Pager \_\_\_\_\_ Cell \_\_\_\_\_ Fax \_\_\_\_\_

Name of person/Contractor conducting burn \_\_\_\_\_

Phone: Home \_\_\_\_\_ Work \_\_\_\_\_ Pager \_\_\_\_\_ Cell \_\_\_\_\_ Fax \_\_\_\_\_

**Full street address** or location of burn site \_\_\_\_\_

**WAS THE SITE EVER A LANDFILL, DUMP OR COALMINE SITE? “ YES “ NO**

Purpose of Burn: Tree or Garden Trimmings (**limit two per year per site, September to May**)

Land Clearing/Property Maintenance

Other \_\_\_\_\_

Description of material to be burned \_\_\_\_\_

Has area been cleared? Yes No Is material piled up? Yes No ?

Is any burn material being brought from another site? Yes No ?

On site means of extinguishment ? Garden hose & hand tools Heavy Equipment Other \_\_\_\_\_

#### **Attach with this application**

**For Tree/Garden trimmings:** “Permission To Burn” forms from neighbors, if applicable.

**For Land Clearing/Property Maintenance:** \$400.00 permit fee, certificate of liability insurance, “Permission to Burn” forms from neighbors, if applicable, and complete site plan drawing showing burn site and required buffers.

I have read and agree to conduct this burn in accordance with the regulations described on the attached page and the Statewide Fire Prevention Code. Further, I understand that failure to follow the regulations will result in the suspension of the permit, issuance of a summons or both.

Signature of Responsible Party \_\_\_\_\_

Print Name \_\_\_\_\_ Date \_\_\_\_\_

Name of person completing form \_\_\_\_\_ Position \_\_\_\_\_

How would you like to receive your permit? Mail Fax Will pickup Email

do not write below this line

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Date Received \_\_\_\_\_  
Reviewed by \_\_\_\_\_  
Permit Fee Paid \_\_\_\_\_

Received by \_\_\_\_\_  
Site Visit    yes        no

Date Permit sent \_\_\_\_\_  
Approved       Denied